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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/630,227	07/30/2003	1615	2120	3518.1015-000		83	4

021005  
HAMILTON, BROOK, SMITH & REYNOLDS, P.C.  
530 VIRGINIA ROAD  
P.O. BOX 9133  
CONCORD, MA 01742-9133

CONFIRMATION NO. 8291

## UPDATED FILING RECEIPT



\*OC000000012164807\*

Date Mailed: 03/23/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Thomas M. DiMauro, Southboro, MA;  
Mohamed Attawia, Canton, MA;  
Hassan Serhan, South Easton, MA;  
Martin A. Reynolds, Mansfield, MA;  
Melissa Grace, Raynham, MA;  
Sudhakar Kadiyala, South Easton, MA;  
David Urbahns, Barrington, RI;  
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Gregory Collins, East Sandwich, MA;  
Laura J. Brown, Hamilton Square, NJ;  
Jeff Geesin, Doylestown, PA;  
Pamela L. Plouhar, South Bend, IN;  
Catherine Smith, East Falmouth, MA;  
John Siekierka, Towaco, NJ;

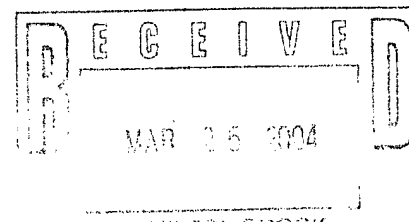
## Assignment For Published Patent Application

~~DePuy AcroMed, Inc., Raynham, MA;~~  
*DePuy Spine, Inc.*

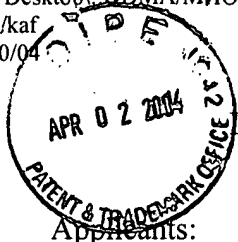
Domestic Priority data as claimed by applicant

## Foreign Applications

If Required, Foreign Filing License Granted: 10/24/2003



HAMILTON BROOK



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:

Thomas M. DiMauro, Mohamed Attawia, Hassan Serhan, Martin A.  
Reynolds, Melissa Grace, Sudhakar Kadiyala, David Urbahns, Scott Bruder,  
Gregory Collins, Laura J. Brown, Jeff Geesin, Pamela L. Plouhar, Catherine  
Smith and John Siekierka

Application No.: 10/630,227

Group: 1615

Filed: July 30, 2003

Examiner: Not yet assigned

Confirmation No.: 8291

For: TRANS-CAPSULAR ADMINISTRATION OF HIGH SPECIFICITY  
CYTOKINE INHIBITORS INTO ORTHOPEDIC JOINTS

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
03/31/04	<i>Kelley A. Face</i>
Date	Signature
<i>Kelley A. Face</i>	
Typed or printed name of person signing certificate	

REQUEST FOR CORRECTED FILING RECEIPT  
FOR UTILITY APPLICATION

Office of Initial Patent Examination  
Customer Service Center  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

We hereby request that the following item of information be corrected in the Filing Receipt for the subject application received in this office on March 23, 2004.

Copies of the concurrently-filed Change of Name Recordation Form Cover Sheet and accompanying Certificate of Amendment by Shareholders or Members and Authentication are submitted herewith.

The errors and corrections appear below.

**“DePuy AcroMed, Inc.” should be -- DePuy Spine, Inc.--**

Enclosed is a copy of the Filing Receipt with changes noted in red and a copy of the Change of Name document.

Pursuant to instructions in the February 29, 2000 O.G., we hereby request that the errors which are identified above be corrected in the captioned application to which this request for correction is directed. It is understood that the Patent Office will issue an automatically-generated, corrected Filing Receipt in this and, if applicable, any other affected applications.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Deirdre E. Sanders

Deirdre E. Sanders

Registration No.: 42,122

Telephone: (978) 341-0036

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Concord, MA 01742-9133

Date: March 31, 2004

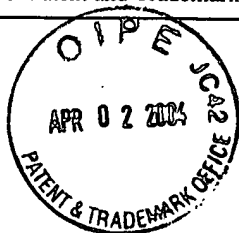
# **RECORDATION FORM COVER SHEET PATENTS ONLY**

**COPY**

To the Director of the U.S. Patent and Trademark Office: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies)

DePuy AcroMed, Inc.



2. Name and address of receiving party(ies)

Name: DePuy Spine, Inc.

Internal Address: \_\_\_\_\_

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

3. Nature of conveyance:

☐ Assignment

☐ Merger

☐ Security Agreement

☒ Change of Name, as evidenced by attached Certificate of Amendment by Shareholders or Members and Authentication

☐ Other \_\_\_\_\_

Street Address: 325 Paramount Drive

City: Raynham State: MA ZIP: 02767-350

Execution Date: October 1, 2003

Additional name(s) & address(es) attached? ☐ Yes ☒ No

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is: \_\_\_\_\_

A. Patent Application No.(s)

10/630,227

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Deirdre E. Sanders, Esq.

Internal Address: Hamilton, Brook, Smith & Reynolds, P.C.

Street Address: 530 Virginia Road, P.O. Box 9133

City: Concord State: MA ZIP: 01742-9133

6. Total number of applications and patents involved: [1]

7. Total Fee (37 C.F.R. 3.41)..... \$ 40.00

☒ Enclosed

☒ Authorized to charge any deficiencies or credit any overpayment to deposit account

☐ Authorization to charge deposit account number 08-0380

Attach a copy of this page if paying by deposit account and filing via mail.

Do not attach a copy of this page if paying by deposit account and filing via facsimile.

**DO NOT USE THIS SPACE**

8. Statement and signature.

*To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.*

Deirdre E. Sanders

Name of Person Signing

Deirdre E. Sanders

Signature

March 31, 2004

Date

Total number of pages including cover sheet, attachments, and document: [5]

2003.  
J. Kenneth Blackwell  
Ohio Secretary of State



Prescribed by **J. Kenneth Blackwell**

Ohio Secretary of State  
Central Ohio: (614) 466-3910  
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

[www.state.oh.us/sos](http://www.state.oh.us/sos)

e-mail: [busserv@sos.state.oh.us](mailto:busserv@sos.state.oh.us)

Expedite this Form: (Select One)

Mail Form to one of the Following

☐ Yes PO Box 1390  
Columbus, OH 43216  
\*\*\* Requires an additional fee of \$100 \*\*\*

☐ No PO Box 1028  
Columbus, OH 43216

**Certificate of Amendment by  
Shareholders or Members  
(Domestic)**

Filing Fee \$50.00

(CHECK ONLY ONE (1) BOX)

<b>(1) Domestic for Profit</b> <input type="checkbox"/> Amended (122-AMAP)	<input checked="" type="checkbox"/> Amendment (125-AMDS)	<b>(2) Domestic Non-Profit</b> <input type="checkbox"/> Amended (126-AMAN)	<input type="checkbox"/> Amendment (128-AMD)
----------------------------------------------------------------------------------	-------------------------------------------------------------	----------------------------------------------------------------------------------	-------------------------------------------------

Complete the general information in this section for the box checked above.

Name of Corporation DePuy AcroMed, Inc.  
Charter Number 614043  
Name of Officer C. W. Smith  
Title Vice President, Law

☒ Please check if additional provisions attached.

The above named Ohio corporation, does hereby certify that:

☐ A meeting of the ☐ shareholders ☐ members was duly called and held on \_\_\_\_\_ (Date)

at which meeting a quorum was present in person or by proxy, based upon the quorum present, an affirmative vote was cast which entitled them to exercise \_\_\_\_\_ % as the voting power of the corporation.

☒ In a writing signed by all of the ☒ shareholders ☐ members who would be entitled to the notice of a meeting or such other proportion not less than a majority as the articles of regulations or bylaws permit.

Clause applies if amended box is checked.

Resolved, that the following amended articles of incorporations be and the same are hereby adopted to supercede and take the place of the existing articles of incorporation and all amendments thereto.

All of the following information must be completed if an amended box is checked.  
If an amendment box is checked, complete the areas that apply.

FIRST: The name of the corporation is: DePuy Spine, Inc.

SECOND: The place in the State of Ohio where its principal office is located is in the City of:

\_\_\_\_\_  
(city, village or township)

\_\_\_\_\_  
(county)

THIRD: The purposes of the corporation are as follows:

FOURTH: The number of shares which the corporation is authorized to have outstanding is: \_\_\_\_\_  
(Does not apply to box (2))

Other: This amendment shall become effective on October 1, 2003.

**REQUIRED**

Must be authenticated  
by an authorized  
representative  
(See Instructions)

Catherine W. Smith

Authorized Representative

C. W. Smith, Vice President, Law

\_\_\_\_\_

Date

\_\_\_\_\_

Authorized Representative

\_\_\_\_\_

Date

\_\_\_\_\_

Authorized Representative

\_\_\_\_\_

Date

## Instructions for Amendment by Shareholders or Members

*Follow these instructions in this section if an item in box (1) is checked.*

Without limiting the generality of the authority to amend the articles, the articles may be amended to do any of the following:

Change the name of the corporation;

Change the place in this state where its principal office is to be located;

Change, enlarge, or diminish its purpose or purposes;

Increase or decrease the authorized number of shares of any class;

Authorized shares of a new class or classes;

Increase or decrease the par value of issued or unissued shares with par value;

Change issued or unissued shares of any class, whether with or without par value, into the same or a different number of shares of any class with or without par value, theretofore or then authorized.

An amendment that changes a corporation into a nonprofit corporation shall contain a statement of purposes proper in the case of a nonprofit corporation and a statement that, after the effective date of the amendment, the corporation shall be subject to the provisions of the ORC relating to nonprofit corporations. In the case of a corporation formed on or after June 9, 1927, the amendment also shall provide for the cancellation of all outstanding shares and the terms and considerations, if any, for the cancellation. In the case of a corporation formed prior to June 9, 1927, the amendment may provide for the cancellation of outstanding shares, but if it does not so provide, the amendment shall contain a provision forbidding the payment of dividends or distributions on any shares after the effective date of the amendment. An additional fee may be charged if the number of shares are being increased.

*Follow these instructions in this section if an item in box (2) is checked.*

The articles may be amended from time to time in any respect if the articles as amended set forth all such provisions as are required in, and only such provisions as may properly be in, original articles filed at the time of adopting the amendment, other than with respect to the initial directors, except that a public benefit corporation shall not amend its articles in such manner that it will cease to be a public benefit corporation.

Without limiting the generality of such authority, the articles may be amended to:

Change the name of the corporation;

Change the place in this state where its principal office is to be located;

Change, enlarge, or diminish its purpose or purposes;

Change any provision of the articles or add any provision that may properly be included therein.

*Follow these instructions in this section for Authorized Representative*

If the entity is a:

**Corporation** - Must be signed by a corporate officer.

**Non-Profit Corporation** - Must be signed by officer.